Approved for use through 0430/2009. OMB 0651-0016

U.S. Patent and Trade-demark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless of displays a valid OMB control number.

Fax to:

## "FEE ADDRESS" INDICATION FORM

Address to:

Mail Stop M Correspondence Commissioner for Patents - OR - P.O. Box 1450 Alexandria, VA 22313-1450	571-273-6500
INSTRUCTIONS: The issue fee must have been paid for application(s) listed on this form. In addition, only an address represented by a Customer Number can be established as the fee address for maintenance fee purposes (hereafter, fee address). A fee address should be established when correspondence related to maintenance fees should be mailed to a different address than the correspondence address for the application. When to check the first box below: If you have a Customer Number represent the fee address. When to check the second box below: If you have no Customer Number representing the desired fee address, in which case a completed Request for Customer Number (PTO/SB/125) must be attached to this form. For more information on Customer Numbers, see the Manual of Patent Examining Procedure (MPEP) § 403.	
For the following listed application(s), please recognize as the "Fee Address" under the provisions of 37 CFR 1.363 the address associated with:	
Customer Number: 78905	
OR	
The attached Request for Customer Number (PTO/SB/125) form.	
PATENT NUMBER (if known)	APPLICATION NUMBER
7,373,319	10/743,982
Completed by (check one):	V 10 1
Applicant/Inventor	Signature Signature
Attorney or Agent of record 44032 (Reg. No.)	Gregory S. Bernabeo, Esq. Typed or printed name
Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)	
Assignee recorded at Reel Frame	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more that one signature is required, see below.	
This collection of information is consisted by 27 CER 1262. The information is consisted to abbit a control to have a been selected by the collection of information is consisted by 27 CER 1262. The information is consisted to abbit as control to have a been selected by the collection of information is consisted by 27 CER 1262. The information is consisted to abbit as control to the collection of information is consisted by 27 CER 1262.	
This collection of information is required by 37 CFR 1.363. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO	

Intl. Collection of information is required by 37° UP 1383. The information is required to obtain on relatin a benefit by the public which is to fill end by the USFT to provide by an explication. Confidentially, is governed by \$8 U.S.C. 122 and \$9 (TP 11 and 1.1. ft.) included in a territory to complete, by the public which is to fill end by the USFT to complete, by the public which is to fill end by the USFT to explicate the second of the USFT to explicate the second of the USFT to explicate the territory to explicate the territory to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patient and Trademark Office, U.S. Department of Commerce, P.C. Des 1450, Alexandria, V. 22311-1490. DO NOT SEND COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Story M Correspondence, Commissioner for Patients, P.O. Box 1450, Alexandria, VA 22311-1490.

If you need assistance in completing the form, and 11-900-PTO-1999 and select option 2.